PCT

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

| For receiving Office use only |
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| |
| International Application No. |
| |
| International Filing Date |
| |
| Name of receiving Office and "PCT International Application" |

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|---|---|---|--|--|--|
| | Applicant's or agent's file ref (if desired) (12 characters maxim | | | | |
| Box No. I TITLE OF INVENTION COMPOSITE YARN COMPRISING A FILAMENT YARN AND A MATRIX COMPRISING A FOAMED POLYMER | | | | | |
| Box No. II APPLICANT | This person is also inventor | | | | |
| Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) CHAVANOZ INDUSTRIE Telephone No. | | | | | |
| 38230 CHAVANOZ | | Teleprinter No. | | | |
| FRANCE | | Applicant's registration No. with the Office | | | |
| State (that is, country) of nationality: FR | State (that is, country) of res | sidence: FR | | | |
| | | United States the States indicated in the Supplemental Box | | | |
| Box No. III FURTHER APPLICANT(S) AND/OR (FURTI | HER) INVENTOR(S) | | | | |
| Name and address: (Family name followed by given name; for a leg The address must include postal code and name of country. The count Box is the applicant's State (that is, country) of residence if no State of t POLLET Laurence 20 rue René Leynaud 69001 LYON FRANCE | ry of the address indicated in this | This person is: applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office | | | |
| State (that is, country) of nationality: FR | State (that is, country) of reside | ence: FR | | | |
| | | United States the States indicated in the Supplemental Box | | | |
| Further applicants and/or (further) inventors are indicated on a cont | inuation sheet. | | | | |
| Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE | | | | | |
| The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: | agent | common representative | | | |
| Name and address: (Family name followed by given name; for a leg The address must include postal code and name | | Telephone No. 04 72 69 84 30 | | | |
| Cabinet GERMAIN & MAUREAU BP 6153 69466 LYON CEDEX 06 | , | Facsimile No. 04 72 69 84 31 | | | |
| FRANCE | | Teleprinter No. | | | |
| | | Agent's registration No. with the Office | | | |
| Address for correspondence: Mark this check-box where no space above is used instead to indicate a special address to which | | s/has been appointed and the | | | |

Form PCT/RO/101 (first sheet) October 2005)

See Notes to the request form

| Continuation of Box No. III FURTHER APPLICANT(S |) AND/OR (FURTHER) INVI | ENTOR(S) | | | |
|---|---|---|--|--|--|
| If none of the following sub-boxes is used, this sheet should not b | e included in the request. | | | | |
| Name and address: (Family name followed by given name; for a lega The address must include postal code and name of country. The country Box is the applicant's State (that is, country) of residence if no State of reDUCRU Violaine 18 rue Lieutenant Colonel Girard 69007 LYON FRANCE | This person is: applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office | | | | |
| | | , | | | |
| State (that is, country) of nationality: FR | State (that is, country) of resi | dence: FR | | | |
| | | the States indicated in the Supplemental Box | | | |
| Name and address: (Family name followed by given name; for a lego The address must include postal code and name of country. The country Box is the applicant's State (that is, country) of residence if no State of reversely. VERAN Stéphane 12 rue Jules Pin 73100 AIX LES BAINS FRANCE | y of the address indicated in this | This person is: applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office | | | |
| State (that is, country) of nationality: | State (that is, country) of resi | | | | |
| FR | | FR | | | |
| | | the States indicated in the Supplemental Box | | | |
| Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) PAJOT Anthony 11 boulevard Porte Neuve 38460 CREMIEU FRANCE This person is: applicant only inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office | | | | | |
| | | | | | |
| State (that is, country) of nationality: FR | State (that is, country) of res | FR | | | |
| | | nited States the States indicated in the Supplemental Box | | | |
| Name and address: (Family name followed by given name; for a lega The address must include postal code and name of country. The countr Box is the applicant's State (that is, country) of residence if no State of re LAMBOUR Stéphanie Place de la Mairie 38200 LUZINAY FRANCE | y of the address indicated in this | This person is: applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office | | | |
| State (that is, country) of nationality: State (that is, country) of residence: | | | | | |
| FR FR FR | | | | | |
| This person is applicant all designated States except the United States indicated in the United States of America only the Supplemental Box | | | | | |
| Further applicants and/or (further) inventors are indicated on another continuation sheet. | | | | | |

| Box No. V DESIGNA | TIONS | | | |
|--|--|---|---|---|
| The filing of this request c | onstitutes under Rule 4. every kind of protection av | 9(a), the designation of a vailable and, where applicab | ll Contracting States bound bele, for the grant of both regio | by the PCT on the international nal and national patents. |
| However, | | | | |
| ☐ DE Germany is not de | signated for any kind of r | national protection | | |
| ☐ KR Republic of Korea | is not designated for any | kind of national protection | | |
| ☐ RU Russian Federation | is not designated for any | y kind of national protection | 1 | |
| | national application from | which priority is claimed. | | e ceasing of the effect, under the as to the consequences of such |
| Box No. VI PRIORITY | CLAIM | | | |
| The priority of the following | earlier application(s) is here | by claimed: | | |
| Filing date | Number | Where earlier application is: | | |
| of earlier application (day/month/year) | of earlier application | national application: country or Member of WTO | regional application:* regional Office | international application: receiving Office |
| item (1) 25/11/2003 25 november 2003 | 03.13813 | | | |
| item (2) | | | | |
| item (3) | | | | |
| Further priority claim | s are indicated in the Suppl | emental Box. | J | L |
| The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office) identified above as: | | | | |
| all items item (1) item (2) item (3) other, see Supplemental Box | | | | |
| *Where the earlier application is an ARIPO application, indicate at least one country party to the Paris Convention for the Protection of Industrial Property or one Member of the World Trade Organization for which that earlier application was filed (Rule 4.10(b)(ii)): | | | | |
| Box No. VII INTERNA | | | | |
| Choice of International Searching Authority (ISA) (if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used): ISA /EP | | | | |
| Request to use results of a International Searching Auth | | to that search (if an earlie | er search has been carried o | it by or requested from the |
| Date (day/month/year) 5 july 2004 | Number FA 6422 | 77 | Country (or regional Office FR | 2) |
| Box No. VIII DECLARA | ATIONS | | | |
| The following declarations at check-boxes below and indicate | re contained in Boxes Nos. te in the right column the nu | VIII (i) to (v) (mark the appli mber of each type of declarati | cable on): | Number of declarations |
| Box No. VIII (i) | Declaration as to the ide | entify of the inventor | | ; |
| Box No. VIII (ii) Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent : | | | | : |
| Box No. VIII (iii) Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application : | | | | |
| Box No. VIII (iv) Declaration of inventorship (only for the purposes of the designation of the United States of America): | | | | : |
| Box No. VIII (v) Declaration as to non-prejudicial disclosures or exceptions to lack of novelty: | | | | : |

| Box No. IX CHECK LIST; LANGUAGE OF | | |
|--|--|---|
| This international application contains: | This international application is accompanied by the foll | |
| (a) on paper, the following number of sheets: | item(s) (mark the applicable check-boxes below and indic right column the number of each item): | cate in of items |
| request (including | 1. 🗵 fee calculation sheet | : |
| declaration sheets) : 4 | 2. original separate power of attorney | : |
| description (excluding sequence listings and/or | 3. | : |
| tables related thereto) : 14 | 4. copy of general power of attorney; reference number | |
| claims : 3 | if any: | |
| abstract : 1 | 5. statement explaining lack of signature | : |
| drawings : 1 | 6. priority document(s) identified in Box No. VI as item(s): | |
| Sub-total number of sheets : 23 | 7. translation of international application into | |
| sequence listing : | (language): 8. separate indications concerning deposited microorg | ; |
| tables related thereto : (for both, actual number | 8. separate indications concerning deposited microorg or other biological material | çanısm : |
| of sheets if filed on paper, | 9. sequence listing in electronic form | · |
| whether or not also filed in electronic form; | (indicate type and number of carriers) | |
| see (c) below) : | (i) copy submitted for the purposes of international Rule 13ter only (and not as part of the international contents) | ıl search under ional application) : |
| Total number of sheets : 23 | (ii) (only where check-box (b)(i) or (c)(i) is marked | l in left column) |
| (b) only in electronic form | additional copies including, where applicable, purposes of international search under Rule 13 | the copy for the |
| (Section 801(a)(i)) | (iii) together with relevant statement as to the ident | |
| (i) sequence listing | copies with the sequence listing mentioned in 1 | |
| (ii) tables related thereto | 10. tables in electronic form related to sequence listing | (indicate |
| (c) also in electronic form (Section 801(a)(ii)) | type and number of carriers) | |
| (i) sequence listing | (i) copy submitted for the purposes of international Section 802(b-quater) only (and not as part of | |
| (ii) tables related thereto | application) | : |
| Type and number of carriers (diskette, | (ii) (only where check-box (b)(ii) or (c)(ii) is mark | |
| CD-ROM, CD-R or other) on which are contained the | additional copies including, where applicable, purposes of international search under Section | 802(b-quater) : |
| sequence listing | (iii) together with relevant statement as to the ident copies with the tables mentioned in left column | |
| ☐ tables related thereto | | |
| (additional copies to be indicated under | 11. 🖂 Oulei (specify). Scarcii Report | ·································· |
| item 9(ii) and/or 10(ii), in right column) | | |
| Figure of the drawings which | Language of filing of the | |
| should accompany the abstract: | international application: French | |
| | T, AGENT OR COMMON REPRESENTATIVE igning and the capacity in which the person signs (if such capacity is n | ot obvious from reading the request). |
| | gining and the capacity in miles the person signs (4) outsit capacity is in | or contact, our remains me requesty. |
| Lyon, 25 november 2004 | | |
| | | |
| TRIPOZ Inès | | |
| Cabinet GERMAIN & MAUREAU | | |
| <u> </u> | For receiving Office use only | |
| 1. Data of actual repairt of the numerical | For receiving office use only | |
| Date of actual receipt of the purported international application: | | 2. Drawings: |
| 3. Corrected date of actual receipt due to later l | nt - | |
| timely received papers or drawings completi | received: | |
| the purported international application: | | |
| | | |
| 4. Date of timely receipt of the required corrections under PCT Article 11(2): | | not received: |
| | | |
| 5. International Searching Authority (if two or more are competent): | 6. Transmittal of search copy delayed | |
| (If two or more are competent): ISA / | until search fee is paid | |
| | For International Bureau use only | |
| Date of receipt of the record copy | | |
| by the International Bureau: | | |

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